

STATEMENT OF CONSIDERATION RELATING TO
907 KAR 10:020

Department for Medicaid Services
Amended After Comments

(1) A public hearing regarding 907 KAR 10:020 was not requested and; therefore, not held.

(2) The following individuals submitted written comments regarding 907 KAR 10:020:

<u>Name and Title</u>	<u>Organization/Agency/Other Entity</u>
Sharon D. Perkins, Director of Health Policy	Kentucky Hospital Association

(3) The following individual from the promulgating agency responded to comments received regarding 907 KAR 10:020:

<u>Name and Title</u>	<u>Organization/Agency/Other Entity</u>
Leslie Hoffmann, Director	Department for Medicaid Services, Division of Community Alternatives
Ann Hollen, Program Manager	Department for Medicaid Services, Division of Community Alternatives
Jonathan MacDonald, Policy Analyst	Department for Medicaid Services, Commissioner's Office
Stuart Owen, Regulation Coordinator	Department for Medicaid Services, Commissioner's Office

SUMMARY OF COMMENTS AND AGENCY'S RESPONSES

(1) Subject: Crisis Stabilization

(a) Comment: Sharon D. Perkins, Director of Health Policy, Kentucky Hospital Association, stated the following:

"This regulation does not provide a provision for residential Crisis Stabilization as a covered service. According to the newly passed Heroin Bill, SB 192, crisis stabilization may be provided by a hospital on hospital grounds. This is a logical component in the continuum of care provided by psychiatric hospitals, as all levels of care are provided by the hospitals. KHA strongly encourages the Cabinet to include language to specifically allow coverage of crisis stabilization provided by psychiatric hospitals."

(b) Response: The Department for Medicaid Services (DMS) addresses residential crisis stabilization unit (RCSU) services and reimbursement in separate administrative regulations – 907 KAR 15:070, Coverage provisions and requirements regarding services provided by residential crisis stabilization units, and 907 KAR 15:075, Reimbursement provisions and requirements regarding services provided by residential crisis stabilization units.

(2) Subject: Amendments for Consistency/Clarity

(a) and (b) Comment and Response: DMS received comments on a related administrative regulation (907 KAR 9:015, Coverage provisions and requirements regarding outpatient services provided by Level I or Level II psychiatric residential treatment facilities which resulted in various amendments for clarity. DMS is revising the language in this administrative regulation accordingly to ensure consistency among administrative regulations.

The changes include clarifying that a face-to-face encounter is not required for any component of service planning that doesn't require the presence of the recipient or recipient's representative; clarifying that if an individual is under eighteen (18) years of age or unable to direct the development of their service planning then a representative may do so; clarifying that an assessment, case management, individual outpatient therapy, group outpatient therapy, peer support services, and mobile crisis services will not be covered if provided during the same period of time as assertive community treatment; and miscellaneous wording changes for uniformity or clarity.

SUMMARY OF STATEMENT OF CONSIDERATION AND ACTION TAKEN BY PROMULGATING ADMINISTRATIVE BODY

The Department for Medicaid Services (DMS) has considered the comments received regarding 907 KAR 10:020 and is amending the administrative regulation as follows:

Page 8
Section 2(3)
Line 5

After "encounter" insert the following:

except for any component of service planning that does not require the presence of the recipient or recipient's representative

Page 28
Section 4(3)(i)1.a.
Line 13

After "the", insert "recipient".

Delete “individual”.

Page 28

Section 4(3)(i)1.b.

Line 14

After “b.”, insert “Recipient’s”.

Page 29

Section 4(3)(j)1.b.(i)

Line 7

After “the”, insert “recipient”.

Delete “individual”.

Page 29

Section 4(3)(j)1.b.(ii)

Line 8

After “(ii)”, insert “Recipient’s”.

Page 30

Section 4(3)(k)3.a.(i)

Line 18

After “the”, insert “recipient”.

Delete “individual”.

Page 30

Section 4(3)(k)3.a.(ii)

Line 19

After “(ii)”, insert “Recipient’s”.

Page 31

Section 4(3)(m)2.a.

Line 17

After “the”, insert a colon, a return, and “(i)”.

After “recipient”, insert the following:

: or

(ii) Recipient’s representative if the recipient is under the age of eighteen (18 years or is unable to provide direction

Page 32

Section 4(3)(n)2.c.

Line 12

After “address”, insert “the recipient’s”.

Page 38

Section 5(2)

Line 8

After “same”, insert the following:

period of time in which the recipient receives assertive community treatment

Delete the following:

date of service for the recipient

Page 41

Section 7(3)(a)1.f.

Line 5

After “f.”, insert “If applicable, the”.

Page 43

Section 7(5)(a)2.b.

Line 1

After “b.”, insert “Behavioral health practitioner’s”.

Delete “Therapist’s”.

Page 47

Section 7(14)(b)3.c.

Line 11

After “enrollee”, insert “the”.